PATENT APPLICATION FEE DETERMINATION RECORD

Effective December 29, 1999

Application or Docket Number

09 596141

CLAIMS AS FILED - PART I SMALL ENTITY OTHER THAN													
(Column 1) (Column 2)							•	TYPE		OR	SMALL		
FOR		NUMBER FILED		NUMBER EXTRA		ſ	RATE	FEE	1 1	RATE	FEE		
BASIC FEE			4.				, , ,			345.00	OR		690.00
TOTAL CLAIMS			55 minus 20=			*	35		X\$ 9=		OR	X\$18=	L 30
INDEPENDENT CLAIMS			y minus 3 =			. 5			X39=		OR	X78=	390
MULTIPLE DEPENDENT CLAIM PRESENT] [+130=		OR	+260=	
* If the difference in column 1 is less than zero, enter "0" in column 2							L	TOTAL		OR	TOTAL	1710	
CLAIMS AS AMENDED - PART II (Column 1) (Column 2) (Column 3)									SMALL I	ENTITY	OR	OTHER SMALL	
AMENDMENT A	**************************************	REM AF	AIMS AINING TÈR IDMENT		PI	HIGHEST NUMBER REVIOUSLY PAID FOR	PRESENT EXTRA		RATE	ADDI- TIONAL FEE		RATE	ADDI- TIONAL FEE
	Total	•	9	Minus	**	55	=		X\$ 9=		OR	X\$18=	
	Independent		/ NOE M	Minus	PEAG		=		X39=		OR	X78=	
FIRST PRESENTATION OF MULTIPLE DEPENDENT CLAIM									+130=		OR	+260=	
											OR	TOTAL	
		(Cal	umn 1)		"	Column 2)	(Column 3)		DDIT. FEE			ADDIT. FEE	
			AIMS	The section	_	HIGHEST	(Column 3)	lr		4001	1		
AMENDMENT B		A	AINING FTER IDMENT			NUMBER REVIOUSLY PAID FOR	PRESENT EXTRA		RATE	ADDI- TIONAL FEE		RATE	ADDI- TIONAL FEE
	Total	•		Minus	*		=		X\$ 9=		OR	X\$18=	
	Independent	<u> </u>		Minus	••		=		X39=		OR	X78=	
	FIRST PRESENTATION OF MULTIPLE DEPENDENT CLAIM										O.		
									+130= TOTAL		OR	+260=	
											OR	TOTAL ADDIT, FEE	
			<u>umn 1)</u>		(0	Column 2)	(Column 3)	_					
AMENDMENT C		REM Af	AIMS AINING TER IDMENT		Pl	HIGHEST NUMBER REVIOUSLY PAID FOR	PRESENT EXTRA		RATE	ADDI- TIONAL FEE		RATE	ADDI- TIONAL FEE
	Total	•		Minus	**		=	lΓ	X\$ 9=		OR	X\$18≈	
	Independent	· .		Minus	•••		=	!	X39=			X78=	
	FIRST PRESE	NTATIO	N OF MI	JLTIPLE DEF	PEN	DENT CLAIM	 	! ├			OR	711 0	
	f the entry in colu	mn tiel	agg than #	na antro in colu	mr 3	write "O" in a	nlumn 3	L	+130=		OR	+260=	
***	If the "Highest Nur If the "Highest Nu If the "Highest Nur The "Highest Nur	mber Pro	eviously Pa eviously Pa	aid For IN THI aid For IN THI	S SP. S SP	ACE is less the	an 20, enter "20. an 3, enter "3."	^ı	TOTAL DDIT, FEE and in the app	propriate box		TOTAL AODIT. FEE umn 1.	